

County: Manitowoc
HAMILTON MEMORIAL HOME
1 HAMILTON DRIVE

Facility ID: 4020

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TWO RIVERS 54241 Phone: (920) 793-2261
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/03): 85
Total Licensed Bed Capacity (12/31/03): 85
Number of Residents on 12/31/03: 80

Ownership: Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 81

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.8
Supp. Home Care-Personal Care	No					1 - 4 Years		41.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.5	More Than 4 Years		22.5
Day Services	No	Mental Illness (Org./Psy)	7.5	65 - 74	11.3			----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	23.8			87.5
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.5		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.5		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	23.8	65 & Over	92.5	-----		
Transportation	No	Cerebrovascular	5.0		-----	RNs		6.5
Referral Service	No	Diabetes	16.3	Gender	%	LPNs		5.3
Other Services	Yes	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	42.5	Male	18.8	Aides, & Orderlies		
Mentally Ill	No		----	Female	81.3			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay		Family Care		Managed Care				Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	1	1.6	129	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	1.3
Skilled Care	7	100.0	311	49	80.3	110	0	0.0	0	12	100.0	150	0	0.0	0	0	0.0	68	85.0
Intermediate	---	---	---	11	18.0	92	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	11	13.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	7	100.0		61	100.0		0	0.0		12	100.0		0	0.0		0	0.0	80	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	7.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	6.5	Bathing	0.0	18.8	81.3	80
Other Nursing Homes	4.3	Dressing	21.3	33.8	45.0	80
Acute Care Hospitals	79.6	Transferring	21.3	51.3	27.5	80
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	21.3	51.3	27.5	80
Rehabilitation Hospitals	0.0	Eating	66.3	23.8	10.0	80
Other Locations	2.2	*****				
Total Number of Admissions	93	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	6.3		Receiving Respiratory Care	5.0
Private Home/No Home Health	7.7	Occ/Freq. Incontinent of Bladder	31.3		Receiving Tracheostomy Care	2.5
Private Home/With Home Health	24.2	Occ/Freq. Incontinent of Bowel	17.5		Receiving Suctioning	1.3
Other Nursing Homes	3.3				Receiving Ostomy Care	0.0
Acute Care Hospitals	15.4	Mobility			Receiving Tube Feeding	1.3
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	5.0		Receiving Mechanically Altered Diets	12.5
Rehabilitation Hospitals	0.0					
Other Locations	11.0	Skin Care			Other Resident Characteristics	
Deaths	38.5	With Pressure Sores	3.8		Have Advance Directives	88.8
Total Number of Discharges		With Rashes	20.0		Medications	
(Including Deaths)	91				Receiving Psychoactive Drugs	53.8

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.3	84.6	1.13	88.0	1.08	88.1	1.08	87.4	1.09
Current Residents from In-County	95.0	75.5	1.26	72.9	1.30	69.7	1.36	76.7	1.24
Admissions from In-County, Still Residing	31.2	18.9	1.65	20.1	1.55	21.4	1.45	19.6	1.59
Admissions/Average Daily Census	114.8	152.9	0.75	129.5	0.89	109.6	1.05	141.3	0.81
Discharges/Average Daily Census	112.3	154.8	0.73	130.3	0.86	111.3	1.01	142.5	0.79
Discharges To Private Residence/Average Daily Census	35.8	63.8	0.56	52.2	0.69	42.9	0.83	61.6	0.58
Residents Receiving Skilled Care	86.3	94.6	0.91	93.7	0.92	92.4	0.93	88.1	0.98
Residents Aged 65 and Older	92.5	93.7	0.99	94.2	0.98	93.1	0.99	87.8	1.05
Title 19 (Medicaid) Funded Residents	76.3	66.0	1.15	66.3	1.15	68.8	1.11	65.9	1.16
Private Pay Funded Residents	15.0	19.0	0.79	21.6	0.69	20.5	0.73	21.0	0.72
Developmentally Disabled Residents	0.0	0.5	0.00	0.5	0.00	0.5	0.00	6.5	0.00
Mentally Ill Residents	7.5	31.3	0.24	36.2	0.21	38.2	0.20	33.6	0.22
General Medical Service Residents	42.5	23.7	1.79	21.5	1.98	21.9	1.94	20.6	2.07
Impaired ADL (Mean)	56.8	48.4	1.17	48.4	1.17	48.0	1.18	49.4	1.15
Psychological Problems	53.8	50.1	1.07	53.4	1.01	54.9	0.98	57.4	0.94
Nursing Care Required (Mean)	5.8	6.6	0.88	6.9	0.84	7.3	0.79	7.3	0.79